

is about 12 to 20 times that of the general population but is still only of the order of 1 in 100. Doctors approached by the relatives of patients with multiple sclerosis would do well to emphasize just how low this risk actually is.

- ¹ Carroll, F. D., *American Journal of Ophthalmology*, 1952, 35, 75.
- ² Bradley, W. G., *Diseases of the Nervous System*, 1968, 29, 668.
- ³ Kurland, L. T., Auth, T. L., Beebe, G. W., Kurtze, J. F., Lessel, S., Nagler, B., and Nafzger, M. D., *Transactions of the American Neurological Association*, 1963, 88, 231.
- ⁴ Lynn, B. H., *Transactions of the Ophthalmological Society of the United Kingdom*, 1959, 79, 701. Adapted by McAlpine, D., *British Medical Journal*, 1964, 2, 1029.
- ⁵ Bradley, W. G., and Whitty, C. W. M., *Journal of Neurology, Neurosurgery and Psychiatry*, 1968, 31, 10.
- ⁶ McAlpine, D., and Compston, N., *Quarterly Journal of Medicine*, 1952, 21, 135.
- ⁷ Leibowitz, U., Alter, M., and Halpern, K., *Archives of Neurology*, 1966, 14, 459.
- ⁸ Mertin, J., Shenton, B. K., and Field, E. J., *British Medical Journal*, 1973, 2, 777.
- ⁹ Mertin, J., Shenton, B. K., and Field, E. J., *Journal of the International Research Communications System (Medical Science)*, 1973, 1, No. 7, 18.
- ¹⁰ Link, H., Norrby, E., and Olsson, J.-E., *New England Journal of Medicine*, 1973, 289, 1103.
- ¹¹ Arnason, B. G. W., *New England Journal of Medicine*, 1973, 289, 1140.
- ¹² McIntyre, J. H., *New Zealand Medical Journal*, 1973, 77, 269.
- ¹³ Field, E. J., Shenton, B. K., Joyce, G., and Mertin, J., *Journal of International Research Communications System (Medical Science)*, 1973, 1, No. 7, 17.
- ¹⁴ Pratt, R. T. C., *The Genetics of Neurological Disorders*. London, Oxford University Press, 1967.

Streaking

Forget motives for the moment. Greek athletes, at least after 720 B.C., streaked naked, but oiled, round their stadia.¹ Boxers and wrestlers, too, were greasy and naked, and in Sparta athletic women took their exercise in the nude. At the other extreme, the Orthodox Jewish code forbids the exposure of any part of the body except the face and hands in public² and condemns the exposure of the nude body to a spouse in bathrooms and even in coitus.

Our culture, marked as usual by irrational compromises, allows public nudity to toddlers but not to anyone a year or two older; it is permissible in nudist clubs, in changing rooms, in saunas and steam baths, but not on beaches, however secluded, or in swimming baths. On the stage and in music halls a ludicrous convention, at least 50 years old, persisted until the recent full-frontal breakthrough: women could appear naked so long as they did not move. They ceased to be flesh and blood and became sculpture: Art—and therefore inoffensive. The law uses penalties to try to protect people who do not so wish from having to see others naked.

In the newest craze the streaker is certainly an offender. Though exhibitionist in the widest sense no one has so far suggested a sexual motive. The offence of indecent exposure, which can incur imprisonment, need not have a sexual intent,³ but streaking is the antithesis of "flashing." There is no lingering to see that shocked look, no chance to catch the look of dawning interest that the "flasher" so vainly hopes his victim will show.

As yet no one has asserted a political motive. Streakers, for a change, do not seem to be protesting about anything. Reports say that they prudently keep their shoes and socks on. There is no symbolic flinging off the shackles of civilization and going back to a state of nature. In the American universities, where (if not in Athens or Sparta—or among 17th century Quakers⁴) it all began, streakers can be men or women, lone

runners, or groups of up to 1,200 students.⁵ Of course there could be safety in numbers.

It is probably best for the present to accept the streakers' own assessment of their motives—a lark, a bet, to liven things up—in fact *epater le bourgeois*, and to expect that with the aid of a few fines the craze will go away. Nevertheless, it is strange that in some cases news cameras have happened to be around. Or isn't it?

- ¹ Stobart, J. C., *The Glory that was Greece*. 3rd edn. London, Sidgwick and Jackson, 1933.
- ² Kinsey, A. C., Pomeroy, W. B., Martin, C. E., and Gebhard, P. H., *Sexual Behaviour in the Human Female*. London, W. B. Saunders, 1953.
- ³ Sexual Offences. *English Studies in Criminal Science Vol IX*, edit. L. Radzinowicz. London, Macmillan, 1957.
- ⁴ *The Times*, 13 March 1974.
- ⁵ *The Economist*, 16 March 1974.

Crisis Working Party

With discontent among consultants in the N.H.S. at an unprecedented pitch Mrs. Barbara Castle, the new incumbent at the Elephant, has announced a joint professional departmental working party, to be chaired by a minister, to make a thorough examination of the consultant contract (see p. 585). The B.M.A., supported by the B.D.A., had been strongly urging Sir Keith Joseph, her predecessor, to set up such an inquiry since it became clear that no progress was being made through normal negotiating channels.¹ He had, after some persuasion, agreed to consider the proposal when the general election intervened.

The new Secretary of State has quickly picked up the idea, probably realizing that unless she acted promptly many hospital doctors would vote with their feet. As an experienced campaigner she will welcome the chance the inquiry offers to air one of her party's dislikes, private practice within the N.H.S., and the working party has been asked to look into that question as well. She may be disappointed in what is unearthed: private practice is not a major part of most consultants' professional lives, rather the reverse. Nevertheless, it has provided a safety valve for many of them, and any question of its prohibition or severe restriction is likely to aggravate a tense medicopolitical situation. Its inclusion in the inquiry raises the question of financial reward, as indeed must any discussions on the N.H.S. contract. Recommendations, on the pay of N.H.S. doctors fall to the Review Body to decide. But unless the Government is prepared to back with hard cash any recommendations from the Review Body based on the working party's proposals hospital doctors will probably see the inquiry as a waste of time. As the present series "Conversations with Consultants" shows, the powerful combination of rising work load, deteriorating conditions, and inadequate pay has precipitated a serious crisis.

Progress is necessary on all three aspects if the hospital service is to attract and retain skilled staff. Pressure from the B.M.A. has produced what may be the last opportunity to resolve matters peacefully. Doctors will hope for a successful outcome, so it is vital that the profession and Whitehall work together so that the working party can report quickly and effectively.

¹ *British Medical Journal Supplement*, 1974, 1, 8.